ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | M. G | | 9/7/00 |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 48 | 9/13/00 |
| FORMALITY REVIEW | 2A | JC583 | 10/12/00 |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | Rejected | | N | | Non-elected |
| = | Allowed | | I | | Interference |
| — | (Through numeral)... Canceled | | A | | Appeal |
| ÷ | Restricted | | O | | Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)